# **FORM D**

CEO NON Cilicil Processing Section DEC 15 LUUB Washington, DC

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OME	3 APPROVAL
OMB Number:	
Expires D	ecember 31, 2008
Estimated ave	rage burden
hours per resp	onse: 16.00

SEC USE ONLY						
Prefix Serial						
DATE RECEIVED						

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)								
Lateef: Alpha+LLC: Limited Liability Compa								
Filing Under (Check box(es) that apply):   R	ule 504	☐ Section 4(6) ☐ ULOE						
Type of Filing: ☐ New Filing ☑ Amendm	nent							
	A. BASIC IDENTIFICATION DATA							
1. Enter the information requested about the issu	ег							
Name of Issuer (□ check if this is an amendme	Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)							
Lateef: Alpha+LLC		08070152						
Address of Executive Offices (Nu	mber and Street, City, State Zip Code)	Te (18010101						
One New York Plaza, New York, New York 10	0004	(212) 902-1000						
Address of Principal Business Operations (if different from Executive Offices)	Telephone Number (Including Area Code)  PROCESSED							
Brief Description of Business		570						
To operate as a private investment fund.		DEC 24 2008  THOMSON REUTE S						
Type of Business Organization	· · · · · · · · · · · · · · · · · · ·	INOMSON REITERS						
☐ corporation	☐ limited partnership, already formed	☑ other (please specify):						
□ business trust	☐ limited partnership, to be formed	Limited Liability Company						
Actual or Estimated Date of Incorporation or Org	Month Year anization: 0 8 0 7	☑ Actual ☐ Estimated						
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviat State: CN for Canada; FN for other foreign jur							

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	A. BASIC IDENTIFICATION DATA										
2.	Enter the information requested for the following:										
	* Each promoter of the issuer, if the issuer has been organized within the past five years;										
	* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;										
	* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
	* Each general and managing partner of partnership issuers.										
Che	eck Box(es) that Apply:										
Full	Name (Last name first, if individual)										
Gol	ldman Sachs Asset Management, L.P. (the Issuer's Managing Member)										
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)										
One	e New York Plaza, New York, New York 10004										
Che	eck Box(es) that Apply:										
Full	Name (Last name first, if individual)										
Asa	ili, Omar M.										
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)										
One	e New York Plaza, New York, New York 10004										
Che	eck Box(es) that Apply:										
	l Name (Last name first, if individual)										
	betta, Jennifer										
	siness or Residence Address (Number and Street, City, State, Zip Code)										
	e New York Plaza, New York, New York 10004										
Che	eck Box(es) that Apply:										
	Name (Last name first, if individual)										
•	ttlieb, Jason										
	siness or Residence Address (Number and Street, City, State, Zip Code)										
	e New York Plaza, New York, New York 10004										
Che	eck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer*   Director   General and/or  * of the Issuer's Managing Member   Managing Partner										
Full	Name (Last name first, if individual)										
Ort	, Peter										
Bus	iness or Residence Address (Number and Street, City, State, Zip Code)										
One	e New York Plaza, New York, New York 10004										
Che	cck Box(es) that Apply:										
Full	Name (Last name first, if individual)										
Ros	s, Hugh M.										
	iness or Residence Address (Number and Street, City, State, Zip Code)										
One	e New York Plaza, New York, New York 10004										
Che	ck Box(cs) that Apply:										
Full	Name (Last name first, if individual)										
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)										

				B. IN	FORMAT	TION ABO	OUT OFF	ERING				
											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										₹		
				Answer also	in Append	lix, Column	2, if filing	under ULO	Е.			
2. What	is the minin	num investr	nent that wi	II be accept	ed from any	/ individual'	?				\$	*
<ul><li>2. What is the minimum investment that will be accepted from any individual?</li><li>*The Issuer's Manager may in its sole discretion accept subscription amounts in whatever amount it determines is</li></ul>									ines is	-		
acceptabl	e.	•									Yes	No
3. Does t	the offering	permit join	t ownership	of a single	unit?			******************			Ø	
comm If a pe or stat	ission or sinerson to be les, list the r	nilar remur isted is an a name of the	sted for each eration for a associated per broker or d et forth the	solicitation erson or age ealer. If m	of purchase ent of a brok ore than five	ers in conne ker or dealer e (5) person	ction with s r registered is to be liste	sales of secu	irities in the C and/or w	offering.		
Full Name	e (Last name	e first, if inc	lividual)		•							
Goldman	, Sachs & C	`o *										
	h the secur r in any jur		sold throu	gh Goldma	ın, Sachs &	Co., no co	mmissions	will be paid	d, directly o	r indirectly	y, for solici	ting any
			Number and	Street, Cit	y, State, Zir	Code)						
		•			, , , <u>,</u>	,						
	Street, Nev Associated E		w York 10	004		<del></del>			<del></del>	·		
	tissociated 1	JOKEI OI D	carci									
			as Solicited dividual Sta								🗹 A	ll States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
Full Name	(Last name	e first, if inc	lividual)				·	-				
Business of	or Residence	e Address (	Number and	Street, Cit	y, State, Zip	Code)						
Name of A	Associated E	Broker or D	ealer			0				_		
States in V	Vhioh Domo	n Listad U	s Solicited		- Caliais Da	L					. <del></del>	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if inc	ividual)									
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	Broker or De	ealer						<del></del>			
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchaeere						<del> ,</del>
			lividual Stat				***************************************		•••••••			All States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		Ā	Amount Already Sold
	Debt	\$_	0	\$		0
	Equity	\$	0	\$		0
	□ Common □ Preferred					
	Convertible Securities (including warrants)	\$	0	\$		0
	Partnership Interests	\$	0	\$		0
	Other (Specify): Limited Liability Company Units	\$	224,251,000	\$		224,251,000
	Total		_	\$		224,251,000
	Answer also in Appendix, Column 3, if filing under ULOE.	_				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number			Aggregate Dollar Amount
	Accredited Investors		Investors	æ		of Purchases
	Non-accredited Investors		97	\$ \$		224,251,000 0
	Total (for filings under Rule 504 only)	_		·	_	
	Answer also in Appendix, Column 4, if filing under ULOE.	_	N/A	Þ	_	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		1	Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A	\$		N/A
	Regulation A	_	N/A	\$		N/A
	Rule 504	_	N/A	\$		N/A
	Total	_	N/A	\$		N/A
d d	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0_
	Printing and Engraving Costs			\$		0
	Legal Fees			\$		39,249
	Accounting Fees			\$	_	0
	Engineering Fees			\$		0
	Sales Commissions (specify finders' fees separately)			\$		0
	Other Expenses (identify)			\$		0
	Total		Ø	\$		39,249
					_	<del> </del>

C. OFFERING PRICE, NUM	<u>1BER OF INVESTORS, EX</u>	PENS	SES A	ND USE OF P	ROCE	<b>EDS</b>	<u> </u>
<ul> <li>b. Enter the difference between the aggregate e</li> <li>- Question 1 and total expenses furnished in the difference is the "adjusted gross proceeds to the</li> </ul>	<b>\$</b> _		224,211,751				
<ol> <li>Indicate below the amount of the adjusted gross to be used for each of the purposes shown. If the furnish an estimate and check the box to the payments listed must equal the adjusted gross properties.</li> <li>Part C - Question 4.b. above.</li> </ol>	the amount for any purpose is not left of the estimate. The total	t knows al of th	n, he				
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees		🗆	<b>\$</b> _	0		\$_	0
Purchase of real estate		🗆	\$_	0	_ 🗆	\$_	0
Purchase, rental or leasing and installation of ma	achinery and equipment	🗖	\$_	0		\$_	0
Construction or leasing of plant buildings and fa	ncilities	🗅	<b>\$</b> _	0	_ 🗆	\$_	0
Acquisition of other businesses (including the this offering that may be used in exchange fanother issuer pursuant to a merger)	for the assets or securities of		\$	0		\$	0
Repayment of indebtedness		🗆	<b>\$</b>	0		<b>\$</b>	0
Working capital			* — \$	0		<b>\$</b>	0
Other (Specify): Limited Liability Company U			\$ — \$	0	- <u>-</u>	\$ \$	224,211,751
Column Totals			\$ — \$	0	- Ø	` —	224,211,751
Total Payments Listed (column totals added)	224,211,751						
	D. FEDERAL SIGNATU	JRE					
The issuer has duly caused this notice to be signifollowing signature constitutes an undertaking by of its staff, the information furnished by the issuer t	the issuer to furnish to the U.S. S	Securiti	ies and	d Exchange Comr	mission,	upon	r Rule 505, the
ssuer (Print or Type)  Lateef: Alpha+ LLC	Signature	<del>7</del>		Date December 12, 20	008		
Name of Signer (Print or Type) Caroline Kraus	Title of Signer (Print or Type) Assistant Secretary of the Iss		Mana	ging Member			

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

